

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.		11/4/99
O.I.P.E. CLASSIFIER			11/8/99
FORMALITY REVIEW		66500	11-30

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Final	Original	Date
1			
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5	✓		9/6/02
6	✓		9/6/02
7	✓		9/6/02
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9	✓		9/6/02
10	✓		9/6/02
11	✓		9/6/02
12	✓		9/6/02
13	✓		9/6/02
14	✓		9/6/02
15	✓		9/6/02
16	✓		9/6/02
17	✓		9/6/02
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If more than 150 claims or 10 actions
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BEST AVAILABLE COPY

Claim	Final	Original	Date
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